

**FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

077020949  
APPLICANT(S)

	CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51	(1)		
2	/						52	(1)		
3	(1)						53			
4	(1)						54			
5	1						55			
6	1						56	(1)		
7	1						57	(1)		
8	(1)						58	(1)		
9	(1)						59			
10	(1)						60	(1)		
11	(1)						61	(1)		
12	(1)						62			
13	(1)						63			
14	(1)						64			
15	(1)						65	1		
16	(1)						66	(1)		
17	1						67	(1)		
18	1						68	(1)		
19	1						69	(1)		
20	1						70	(1)		
21	1						71	(1)		
22	(1)						72	(1)		
23	1						73	(1)		
24	1						74	(1)		
25	1						75	(1)		
26	(1)						76	(1)		
27	(1)						77	(1)		
28							78	(1)		
29							79	(1)		
30							80	(1)		
31							81	(1)		
32							82	(1)		
33							83	(1)		
34							84	(1)		
35	1						85	1		
36	1						86	1		
37	1						87	1		
38	1						88	1		
39	1						89	(1)		
40	(1)						90			
41	1						91			
42	1						92			
43	1						93			
44	(1)						94			
45	(1)						95			
46	(1)						96			
47	(1)						97			
48	(1)						98			
49	(1)						99			
50	(1)						100			
TOTAL IND.							TOTAL IND.			
TOTAL DEP.							TOTAL DEP.			
TOTAL CLAIMS							TOTAL CLAIMS			